

NONCONVERSION AGREEMENT with CITY OF WAVELAND, MISSISSIPPI

This DECLARATION made this day of
at Z13 Nicholsan Ave.
WITNESSETH:
WHEREAS, the Owner is the record owner of all that real property located at 213 Nicholson Ave.
In the City of Waveland, MS, in the County of Hancock, designated in the Tax Records as
WHEREAS, the Owner has applied for a permit to place a structure on that property that has an enclosed area below the base flood elevation constructed in accordance with the requirements of Article No. 5, Section "B" paragraph 5 of Waveland Floodplain Management Ordinance of Number 342 and under Permit Number 18583.
WHEREAS, the Owner agrees to record this DECLARATION and certifies and declares that the following covenants, conditions and restrictions are placed on the affected property as a condition of granting the Permit, and affects rights and obligations of the Owner and shall be binding on the Owner, his heirs, personal representatives, successors, future owners, and assigns
UPON THE TERMS AND SUBJECT TO THE CONDITIONS, as follows:
1. The structure or part thereof to which these conditions apply is:
2. At this site, the Base Flood Elevation is <u>ZO</u> feet above mean sea level, National Geodetic Vertical Datum.
3. Enclosed areas below the Base Flood Elevation shall be used solely for parking of vehicles, limited storage, or access to the building. All interior walls, ceilings and floors

below the Base Flood Elevation shall be unfinished or constructed of flood resistant materials. Mechanical, electrical or plumbing devices shall not be installed below the

Base Flood Elevation.

Hancock County

I certify this instrument was filed on

ate R. Due

- 4. The walls of the enclosed areas below the Base Flood Elevation shall be equipped and remain equipped with openings as shown on the Permit.
- 5. The jurisdiction issuing the Permit and enforcing the Ordinance may take any appropriate legal action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.
- 6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation of the Permit.
- 7. Other conditions:

In witness whereof the undersigned set their hands and seals this

Katherine S. Bensabat (Print)	
Weshwine 3. Bensubut (Signature) OWNER	
Timothy A. Kellar (Signature) By: WIRNESS DE My Commission Expires Dec. 3	State of Mississippi, County of Hancock Personally appeared before me, the undersigned authority in and for the said county and state, on this day of day of within my jurisdiction, the within named executed the above and foregoing instrument.
My Commission Express 200	

Hancock County Chancery Clerk Instrument Recording Receipt

Book: Deed Inst: Agreement Book/Page: 2018 / 636 Ref: KATHY BENSABAT 4377

Archiver Record Management Need	1,00 11,00
Recording Fee	0.00 12.00
Total rees i	
Total Due : \$ Checks Paid: \$	12.00 12.00
Total Paid :	12.00
Change Due : \$	0.00

Have a Nice Day Timothy A Kellar

Term/Cashier: RM175-03-9MFQDQ / KATIE

Tran: 12562.178484.213992

Printed: 01-12-2018 11:13:53 AM



WAVELAND

OCCUPANCY CERTIFICATE

This Certificate issued pursuant to the requirements of the International Building Code certifying that at the time of issuance this structure was in compliance with the various ordinances of the Jurisdiction regulating building construction or use. For the following:

Issued to:

MARK BENSABAT

Building Address 213 NICHOLSON AVE City, State Zip WAVELAND, MS 39576

Permit No. N/A
Certificate No. C02274
Security ID: LIJE

/ · // Date

Issued: 1/11/2018

ding Official

POST IN A CONSPICUOUS PLACE

Comments:

No Speial Conditions

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008

Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

	SEC	TION A - PROPERTY	INFOR	MATION	F	FOR INSURANCE COMPANY USE		
A1. Building Owne						Policy Num		
MARK BENSAI		*						
 Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 							IAIC Number:	
213 NICHOLSON AVENUE								
City State ZIP Code								
WAVELAND		181 111 -	_	MISSISSIP		39576		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOTS 3 THRU 5, BLOCK 1, EMMA ULMAN SUBDIVISION; TAX PIDN:161C-0-02-164.000								
A4. Building Use (e.g., Residen	tial, Non-Residential, A	Addition	, Accessory, etc.)	DETACHED CAR	PORT		
A5. Latitude/Longit	ude: Lat. N	30°17'26.864"	Long. 1	V89°21'41.281"	Horizontal Datum:	□ NAD	1927 X NAD 1983	
A6. Attach at least	2 photograpl	hs of the building if the	Certific	ate is being used to	obtain flood insuran	ce.		
A7. Building Diagra	m Number	1A						
A8. For a building	with a crawls _l	pace or enclosure(s):						
a) Square foot	age of crawls	space or enclosure(s)		208 sq ft				
b) Number of p	permanent flo	ood openings in the cra	wlspac	e or enclosure(s) w	ithin 1.0 foot above a	djacent gr	ade 2	
c) Total net are	ea of flood op	penings in A8.b 40	0 5	sq in			-	
d) Engineered	flood openin	gs? ⊠ Yes □ No	0					
A9. For a building v	vith an attach	ed garage:					*	
a) Square foot	age of attach	ed garage N/A		sq ft				
b) Number of	ermanent flo	ood openings in the atta	ached o	arage within 1.0 foo	ot above adiacent gra	ıde	N/A	
c) Total net are			I/A	sq in		-	II/A	
d) Engineered	57 S							
		30. 100 MW	Ü					
	SE	CTION B - FLOOD IN	ISURA	NCE RATE MAP	(FIRM) INFORMAT	ON		
B1. NFIP Communi	ty Name & C	ommunity Number		B2. County Name			B3. State	
CITY OF WAVEL	ND 285262	2		HANCOCK			MISSISSIPPI	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date		RM Panel fective/	B8. Flood Zone(s)	B9. Bas	se Flood Elevation(s) ne AO, use Base	
	_		R	evised Date		Floo	od Depth)	
28045C0361	D	10/16/2009	10	0/16/2009	AE		20 FT	
B10. Indicate the so	ource of the E	Base Flood Elevation (I	BFE) da	ata or base flood de	pth entered in Item E	9:		
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: [FIS Profile X FIRM Community Determined Determi								
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 Other/Source:								
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes X No								
Designation D				□ OPA			,. [] 135 [A] NO	
			טונט					

IMPORTANT: In these spaces, copy the corresponding			FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/or 213 NICHOLSON AVENUE	Policy Number:							
City Stat WAVELAND MIS		Code 576	Company NAIC Number					
SECTION C – BUILDING ELE	VATION INFORMA	TION (SURVEY R	EQUIRED)					
C1. Building elevations are based on: Construction	hamal and the same of the same	Iding Under Constru	uction*					
*A new Elevation Certificate will be required when construction of the building is complete.								
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO. Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.								
Benchmark Utilized: EARL DUDLEY RTK NETWO		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	D03)					
Indicate elevation datum used for the elevations in ite ☐ NGVD 1929 🗵 NAVD 1988 ☐ Other/S	11 (6) (70)	W.						
Datum used for building elevations must be the same		BFF						
200			Check the measurement used.					
a) Top of bottom floor (including basement, crawlspa	ace, or enclosure floor		X feet meters					
b) Top of the next higher floor		N. A	feet meters					
c) Bottom of the lowest horizontal structural member	(V Zones only)	N. <u>A</u>	feet meters					
d) Attached garage (top of slab)		N. A	feet meters					
 e) Lowest elevation of machinery or equipment serv (Describe type of equipment and location in Comr 	icing the building ments)	N. A	X feet meters					
f) Lowest adjacent (finished) grade next to building	(LAG)	14.4	X feet meters					
g) Highest adjacent (finished) grade next to building	(HAG)	<u>16</u> . 1	x feet meters					
 h) Lowest adjacent grade at lowest elevation of deck structural support 	or stairs, including	N. A	feet meters					
SECTION D – SURVEYOR,	ENGINEER, OR ARC	CHITECT CERTIF	CATION					
This certification is to be signed and sealed by a land sur- I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment und	my best efforts to inter	pret the data availa	law to certify elevation information. ble. I understand that any false					
Were latitude and longitude in Section A provided by a lice	10 1500	⊠Yes □ No	Check here if attachments.					
Certifier's Name PATRICK M. MARTINO	License Number		ANTESTITION OF THE PARTY OF THE					
Title			A STATE OF THE STA					
PROFESSIONAL LAND SURVEYOR			A QOFESSON Z					
Company Name			The state of the s					
PATRICK M MARTINO, PLS INC.		1	P.L.S. 2838					
Address 13010 KAYLEIGH COVE		/	PANO SURVEYOR					
City BILOXI	State MISSISSIPPI	ZIP Code 39532	OF MISSISTER					
Signature Signature	Date 3/22/2017	Telephone (228) 396-228	3 JOB# P17233 (P16578)					
Copy all pages of this Elevation Certificate and all attachmen	its for (1) community of	ficial, (2) insurance	agent/company, and (3) building owner.					
Comments (including type of equipment and location, per	C2(e), if applicable)							
INFORMATION SHOWN IN SECTION A7, A8, WERE AS PER HOUSE PLANS PROVIDED. ITEM SHOWN IN SECTION C2(a) IS PROPOSED AT THIS TIME. THIS ELEVATION CERTIFICATE IS FOR A PROPOSED DETACHED CARPORT. THE CITY OF WAVELAND HAS ADOPTED A 1 FOOT FREEBOARD ELEVATION ABOVE THE ELEVATION SHOWN IN ITEM B9. SUBJECT PARCEL ALSO LIES WITHIN THE LIMIT OF MODERATE WAVE ACTION. CONTACT CITY OF WAVELAND BUILDING OFFICIALS FOR ANY FURTHER BUILDING HEIGHT REQUIREMENTS.								

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATE Important: Follow the instructions on pages 1–9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

	SEC	TION A - PROPERTY	INFOR	RMATION		FOR INSU	RANCE COMPANY USE	
A1. Building Owner's Name MARK BENSABAT						Policy Num	nber:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.213 NICHOLSON AVENUE							NAIC Number:	
City State ZIP Code WAVELAND MISSISSIPPI 39576								
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOTS 3 THRU 5, BLOCK 1, EMMA ULMAN SUBDIVISION; TAX PIDN:161C-0-02-164.000							
A4. Building Use (e.g., Residen	tial, Non-Residential,	Addition	, Accessory, etc.)	DETACHED CA	RPORT		
A5. Latitude/Longi	tude: Lat. N	30°17'26.864"	Long. I	W89°21'41.281"	Horizontal Datum	: NAD	1927 X NAD 1983	
A6. Attach at least	2 photograp	ns of the building if the	Certific	cate is being used to	o obtain flood insura	nce.		
A7. Building Diagra	am Number	1A						
A8. For a building	with a crawls	pace or enclosure(s):						
a) Square foo	tage of crawls	space or enclosure(s)		208 sq ft				
b) Number of	permanent flo	ood openings in the cra	awlspac	e or enclosure(s) w	ithin 1.0 foot above	adjacent gr	ade ZERO	
c) Total net ar	ea of flood op	enings in A8.b ZEI	RO_S	sq in				
d) Engineered	flood openin	gs? Yes 🗵 N	0					
A9. For a building v	vith an attach	ed garage:						
a) Square foot	age of attach	ed garage N/A		sq ft				
		ood openings in the att	ached o	garage within 1.0 fo	ot above adjacent d	rade	N/A	
			I/A	sq in			N/A	
d) Engineered			•					
d) Engineered	nood opening	93: [163 [A N	O					
	SE	CTION B - FLOOD IN	SURA	NCE RATE MAP	(FIRM) INFORMA	TION		
B1. NFIP Communi	ty Name & C	ommunity Number		B2. County Name			B3. State	
CITY OF WAVEL	ND 28526	2		HANGOCK			MISSISSIPPI	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	E	IRM Panel ffective/ evised Date	B8. Flood Zone(s)	(Zo	se Flood Elevation(s) ne AO, use Base od Depth)	
28045C0361	D	10/16/2009	10	0/16/2009	AE		20 FT	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: ☐ FIS Profile 区 FIRM ☐ Community Determined ☐ Other/Source:								
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 Other/Source:								
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Tyes X No								
Designation D				☐ OPA		2."	_	
	1979-0-100							

IMPORTANT: In these spaces, copy the correspondi			-	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and 213 NICHOLSON AVENUE	D.	Policy Number:					
City S WAVELAND		Company NAIC Number					
SECTION C - BUILDING I	ELEVATION INFORMA	TION (SURVE	Y RE	QUIRED)			
	etion Drawings* But a construction of the build a construction of the build at a construction of the build at a construction of the building diagram specified at a construction of the speci	ilding Under Colling is complete BFE), AR, AR/A in Item A7. In Item A7. In Item A8. (Columbia)	anstruction Annual Annu	Etion* Finished Construction AE, AR/A1–A30, AR/AH, AR/AO. Rico only, enter meters.			
 f) Lowest adjacent (finished) grade next to build g) Highest adjacent (finished) grade next to build h) Lowest adjacent grade at lowest elevation of c structural support 	ng (LAG) ing (HAG)	15. 16. N.	7				
SECTION D - SURVEYO	R, ENGINEER, OR AR	CHITECT CER	RTIFIC	CATION			
This certification is to be signed and sealed by a land sold for the information on this Certificate represent statement may be punishable by fine or imprisonment. Were latitude and longitude in Section A provided by a Certifier's Name	surveyor, engineer, or arc nts my best efforts to inte under 18 U.S. Code, Sec licensed land surveyor?	chitect authorize rpret the data a ction 1001.	ed by I evailab	aw to certify elevation information			
PATRICK M. MARTINO	License Number 02838			ASSISTANCE M. M. M.			
Title PROFESSIONAL LAND SURVEYOR Company Name PATRICK M MARTINO, PLS INC. Address 13010 KAYLEIGH COVE			(h	10 SUNE 0 8			
City	State MISSISSIPPI	ZIP Code 39532		OF MISS			
Signature	Date 5/2/2017	Telephone (228) 396-		AND THE PROPERTY OF STREET			
Copy all pages of this Elevation Certificate and all attachr		fficial, (2) insura	nce ag	gent/company, and (3) building owne			
Comments (including type of equipment and location, possible that the DETACHED CARPORT WAS UNDER COPLACE AT TIME OF SURVEY. ITEM "C2-a" IN OF WAVELAND HAS ADOPTED A 1 FOOT FIFTEM B9. SUBJECT PARCEL ALSO LIES WITHOUT OF WAVELAND BUILDING OFFICIALS FOR A SUBJECT PARCEL ALSO LIES WITHOUT THE PROPERTY OF WAVELAND BUILDING OFFICIALS FOR A SUBJECT PARCEL ALSO LIES WITHOUT THE PROPERTY OF WAVELAND BUILDING OFFICIALS FOR A SUBJECT PARCEL ALSO LIES WITHOUT THE PROPERTY OF WAVELAND BUILDING OFFICIALS FOR A SUBJECT PARCEL ALSO LIES WITHOUT THE PROPERTY OF WAVELAND BUILDING OFFICIALS FOR A SUBJECT PARCEL ALSO LIES WITHOUT THE PROPERTY OF WAVELAND BUILDING OFFICIALS FOR A SUBJECT PARCEL ALSO LIES WITHOUT THE PROPERTY OF WAVELAND BUILDING OFFICIALS FOR A SUBJECT PARCEL ALSO LIES WITHOUT THE PROPERTY OF WAVELAND BUILDING OFFICIALS FOR A SUBJECT PARCEL ALSO LIES WITHOUT THE PROPERTY OF WAVELAND BUILDING OFFICIALS FOR A SUBJECT PARCEL ALSO LIES WITHOUT THE PROPERTY OF WAVELAND BUILDING OFFICIALS FOR A SUBJECT PARCEL ALSO LIES WITHOUT THE PROPERTY OF WAVELAND BUILDING OFFICIALS FOR A SUBJECT PARCEL ALSO LIES WITHOUT THE PROPERTY OF WAVELAND BUILDING OFFICIALS FOR A SUBJECT PARCEL ALSO LIES WITHOUT THE PROPERTY OF WAVELAND BUILDING OFFICIALS FOR A SUBJECT PARCEL ALSO LIES WITHOUT THE PROPERTY OF WAVELAND BUILDING OFFICIALS FOR A SUBJECT PARCEL ALSO LIES WITHOUT THE PROPERTY OF WAVELAND BUILDING OFFICIALS FOR A SUBJECT PARCEL ALSO LIES WITHOUT THE PROPERTY OF WAVELAND BUILDING PARCEL AND WAVELAND BUILDING PARCEL PARCEL PARCEL PARCEL PARCEL PARCEL	ONSTRUCTION AND S THE ELEVATION (REEBOARD ELEVAT THIN THE LIMIT OF	OF THE TOP ION ABOVE MODERATE	OF S THE WAV	STORAGE AREA. THE CITY ELEVATION SHOWN IN /E ACTION. CONTACT CITY			

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE							
Building Street Address (including Apt., Unit, Suite, and/o 213 NICHOLSON AVENUE	Policy Number:							
City Sta WAVELAND M	ate ISSISSIPPI	ZIP Code 39576		Company NAIC Number				
SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)								
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters. E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below								
the highest adjacent grade (HAG) and the lowest adj a) Top of bottom floor (including basement,	eck the appropria acent grade (LAG	te boxes to show w).	/hether					
crawlspace, or enclosure) is b) Top of bottom floor (including basement, crawlspace, or enclosure) is			meters	□ above or □ below the HAG. □ above or □ below the LAG.				
E2. For Building Diagrams 6–9 with permanent flood ope the next higher floor (elevation C2.b in the diagrams) of the building is	nings provided in		and/or 9 meters	See See				
E3. Attached garage (top of slab) is			meters	above or below the HAG.				
E4. Top of platform of machinery and/or equipment servicing the building is		feet [meters	☐ above or ☐ below the HAG.				
E5. Zone AO only: If no flood depth number is available, floodplain management ordinance? Yes N	is the top of the bo lo Unknown.	ottom floor elevated The local official	l in acco must ce	ordance with the community's ertify this information in Section G.				
SECTION F - PROPERTY OWNE	R (OR OWNER'S	REPRESENTATIV	/E) CEF	RTIFICATION				
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	who completes Se statements in Sec	ections A, B, and E tions A, B, and E a	for Zone	e A (without a FEMA-issued or ct to the best of my knowledge.				
Property Owner or Owner's Authorized Representative's N	Name							
Address	City		Stat	e ZIP Code				
Signature	Date)	Tele	phone				
Comments	, , , , , , , , , , , , , , , , , , , ,							
				Check here if attachments.				

IMPORTANT: In these spaces, copy the corre	esponding information fror	n Section A.	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, St. 213 NICHOLSON AVENUE	Policy Number:						
City WAVELAND	State MISSISSIPPI	ZIP Code 39576	Company NAIC Number				
SECTIO	N G - COMMUNITY INFOR	MATION (OPTIONAL)					
The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.							
G1. The information in Section C was take engineer, or architect who is authorized data in the Comments area below.)	en from other documentation ed by law to certify elevation	that has been signed an information. (Indicate the	nd sealed by a licensed surveyor, e source and date of the elevation				
G2. A community official completed Section or Zone AO.	-	 					
G3. The following information (Items G4–	G10) is provided for commur	nity floodplain managem	ent purposes.				
G4. Permit Number	G5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued				
G7. This permit has been issued for:	New Construction Subs	tantial Improvement					
G8. Elevation of as-built lowest floor (including of the building:	s basement)		meters Datum				
G9. BFE or (in Zone AO) depth of flooding at t	he building site:	[feet	meters Datum				
G10. Community's design flood elevation:	-		meters Datum				
Local Official's Name	Title						
Community Name	Tele	phone					
Signature	Date						
Comments (including type of equipment and loc	ation, per C2(e), if applicable	9)					
			Check here if attachments.				

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, c	FOR INSURANCE COMPANY USE		
Building Street Address (including 213 NICHOLSON AVENUE	Policy Number:		
City	State	ZIP Code	Company NAIC Number
WAVELAND	MISSISSIPPI	39576	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One Caption FRONT VIEW OF CARPORT. PICTURE WAS TAKEN 5-2-2017.



Photo Two Caption REAR VIEW OF CARPORT. PICTURE WAS TAKEN 5-2-2017.

ELEVATION CERTIFICATE

Continuation Page

IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, S 213 NICHOLSON AVENUE	uite, and/or Bldg. No.) or P	.O. Route and Box No.	Policy Number:
City WAVELAND	State MISSISSIPPI	ZIP Code 39576	Company NAIC Number
If submitting more photographs than will fit of with: date taken; "Front View" and "Rear photographs must show the foundation with re	on the preceding page, aff View"; and, if required, " epresentative examples of t	ix the additional photogr Right Side View" and the flood openings or ven	raphs below. Identify all photographs "Left Side View." When applicable, ts, as indicated in Section A8.
	DI. 1. 0		
	Photo Or	10	
	Photo One		
Photo One Caption			
	Photo Tw	10	
Photo Two Caption	Photo Two		

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008

Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

		TION A - PROPERTY	'INFOF	RMATION		FOR INSURANCE COMPANY USE	
A1. Building Own MARK BENSABA						Policy Num	
Box No. 213 NICHOLSON		cluding Apt., Unit, Suite	e, and/o	or Bldg. No.) or P.O	. Route and	Company N	NAIC Number:
City WAVELAND				State Mississippi		ZIP Code 39576	
The second control of the second seco	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TAX PARCEL # (161C-0-02-164.000)						
A4. Building Use ((e.g., Residen	ntial, Non-Residential, A	Addition	n, Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Longi	itude: Lat. <u>N</u>	30-17-30	Long. V	V 89-21-43	Horizontal Datum	: NAD	1927 × NAD 1983
A6. Attach at least	t 2 photograp	hs of the building if the	Certific	cate is being used t	o obtain flood insura	nce.	
A7. Building Diagra	am Number	6					
		pace or enclosure(s):					
a) Square foo	tage of crawl	space or enclosure(s)		154 sq ft			
		ood openings in the cra		ce or enclosure(s) w	ithin 1.0 foot above	adjacent gr	ade4
c) Total net ar	ea of flood op	penings in A8.b		sq in			
d) Engineered	l flood openin	gs? 🛛 Yes 🗌 No	0				
A9. For a building v	with an attach	ned garage:	e				
a) Square foot	tage of attach	ed garage		sq ft			
b) Number of	permanent flo	ood openings in the atta	ached (garage within 1.0 fo	ot above adjacent gr	ade	£
c) Total net are	ea of flood op	penings in A9.b		sq in		-	
d) Engineered	flood openin	gs? Yes N	0	•			
		20 Blocks out					
24 MEID 0		CTION B – FLOOD IN	ISURA	T		ION	
B1. NFIP Communi WAVELAND 28526		ommunity Number		B2. County Name HANCOCK			B3. State Mississippi
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Ef	IRM Panel ffective/ evised Date	B8. Flood Zone(s)	(Zor	e Flood Elevation(s) ne AO, use Base nd Depth)
28045C-0361	D	10/16/2009	10/16		AE	1100	20
B10. Indicate the so	ource of the E	Base Flood Elevation (E	= 3FE) da	ata or base flood de	epth entered in Item F	39:	
FIS Profile	▼ FIRM [Community Determ	ined [Other/Source: _			
B11. Indicate eleva	tion datum us	sed for BFE in Item B9:	: N	GVD 1929 ⊠ NA	VD 1988	er/Source: _	
B12. Is the building	located in a	Coastal Barrier Resour	rces Sy	stem (CBRS) area	or Otherwise Protect	ted Area (O	PA)? ☐ Yes ☒ No
Designation D			BRS	□ ОРА		G0000000000000000000000000000000000000	

IMPORTANT: In these spaces, copy the corresponding information from Sec	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Rou 213 NICHOLSON AVE		Policy Number:			
CityStateZIP (WAVELANDMississippi3957	Code 76	Company NAIC Number			
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)					
C1. Building elevations are based on: Construction Drawings* Building *A new Elevation Certificate will be required when construction of the building C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE Complete Items C2.a–h below according to the building diagram specified in Benchmark Utilized: USM NETWORK Vertical Datum: Indicate elevation datum used for the elevations in items a) through h) below NGVD 1929 NAVD 1988 Other/Source: Datum used for building elevations must be the same as that used for the Brain a) Top of bottom floor (including basement, crawlspace, or enclosure floor) b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) f) Lowest adjacent (finished) grade next to building (HAG)	fing Under Construction of second complete. FE), AR, AR/A, AR/A, AR/A, Item A7. In Puerto NAVD 1988 V. FE. 16. 9 27. 5 N/A. N/A. 26. 5 16. 0 16. 0	Check the measurement used. Check the meters Check			
 h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 	<u>15</u> . 9	X feet meters			
SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No Check here if attachments.					
Certifier's Name License Number DUKE LEVY 01722					
TATALON TATALON	ZIP Code 39576	Place PROFESS Seal AND SHERE 7448 PLS. 1722 OF MISSISSIPPLIANCE O			
12/20/2017	Telephone (228) 467-5212				
Copy all pages of this Elevation Certificate and all attachments for (1) community office Comments (including type of equipment and location, per C2(e), if applicable) WO # 17-306 A/C IS THE LOWEST MACHINERY LOCATED ON THE NORTH SIDE OF THE HATHE ENCLOSURES CONSIST OF AN ELEVATOR SHAFT (40.7' SQ FT) AND STENGINEERED VENTS. EACH VENT COVERS 200 SQ. FT.	HOUSE.				

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 213 NICHOLSON AVE		FOR INSURANCE COMPANY USE Policy Number:	
City	State	ZIP Code	Company NAIC Number
WAVELAND	Mississippi	39576	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

Photo One Caption



Photo Two

Photo Two Caption

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2018

			,
IMPORTANT: In these spaces, copy the corresponding information from Section A. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 213 NICHOLSON AVE			FOR INSURANCE COMPANY USE Policy Number:
WAVELAND	Mississippi	39576	***

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo One

Photo One Caption



Photo Two

Photo Two Caption